

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

# FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

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MB Num	ber:		323	5-0076	3
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...16.00

SEC USE	ONLY
Prefix	Serial
DATE REC	CEIVED
1	

hours per response.

Name of Offering ( check if this is an amendment and name has changed, and indicate change.)  CA One Investors L.L.C.	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) ULOE Type of Filing: New Filing Amendment	05061626
A. BASIC IDENTIFICATION DATA	05001020
1. Enter the information requested about the issuer	<u> </u>
Name of Issuer ( check if this is an amendment and name has changed, and indicate change.)	
CA One Investors L.L.C.	•
Address of Executive Offices (Number and Street, City, State, Zip Code) Telephone N	Number (Including Area Code)
1612 E. Cape Coral Parkway, Cape Coral, Florida 33904 (239) 542-06	43
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Number (Including Area Code)
Brief Description of Business	
Investment in Costa Rican entity	
Type of Business Organization	
E training and E training at the former	imited liability company programmes
Month Year	
Actual or Estimated Date of Incorporation or Organization: O 8 O 5 Actual Estimated  Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State:  CN for Canada; FN for other foreign jurisdiction)	AUG S : 2005

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

### State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

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Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

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2. Enter the information request	ed for the foll	owing:			
<ul> <li>Each promoter of the iss</li> </ul>	suer, if the issi	ier has been organized wit	thin the past five years;	•	
<ul> <li>Each beneficial owner has</li> </ul>	aving the powe	r to vote or dispose, or dire	ect the vote or disposition	of, 10% or more of a	class of equity securities of the issuer.
<ul> <li>Each executive officer a</li> </ul>	nd director of	corporate issuers and of c	corporate general and man	naging partners of pr	artnership issuers; and
<ul> <li>Each general and manage</li> </ul>	ing partner of	partnership issuers.			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indian Russell A. Whitney	vidual)				
Business or Residence Address ( 1612 E. Cape Coral Parkway	•		de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if indi	vidual)				
Business or Residence Address 1612 E. Cape Coral Parkway,		Street, City, State, Zip Co. Florida 33904	de)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if inde Grace & Peace, LLC, a Florid	-	bility company			
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
1612 E. Cape Coral Parkway,	Cape Coral	, Florida 33904			
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)		•		
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)		
Check Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	General and/or Managing Partner
Full Name (Last name first, if ind	lividual)				
Business or Residence Address	(Number and	Street, City, State, Zip Co	ode)	-	

					* (*B.°1)	FORMALI	ON ABOU	OFFERI	Ğ,				
1. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?									Yes	No			
Answer also in Appendix, Column 2, if filing under ULOE.										_	<del></del>		
2.	What is	the minim	um investm	ent that wi	ill be accep	pted from a	ny individ	ıal?	***************************************			\$ <u>250</u>	,000.00
2	Dogg the	offoring s	ermit joint	oven anah i	. of a sina	la unit?		•				Yes	No
3. 4.			ion request		_							×	
•	commiss If a perso or states	sion or simi on to be lis , list the na	ilar remuner ted is an ass me of the bi you may se	ration for so ociated per roker or de	olicitation rson or age aler. If mo	of purchase nt of a brok re than five	rs in conne er or dealer (5) person	ction with registered s to be liste	sales of sec with the S ed are asso	urities in th EC and/or	ne offering. with a state		
Fu	ll Name (I	ast name	first, if indi	vidual)									
Bu	siness or l	Residence	Address (N	umber and	Street, Ci	ty, State, Z	ip Code)						
Na	me of Ass	ociated Br	oker or Dea	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit I	urchasers			<del></del>			
	(Check	"All States	" or check	individual	States)	••••••			•••••	•••••			States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	WI	OR WY	PA
<u></u>													
ru.	ii Name (i	Last name	first, if indi	vidual)									
Bu	siness or	Residence	Address (N	Number an	d Street, C	City, State, 2	Zip Code)				<u> </u>		
Na	me of Ass	ociated Br	oker or Dea	aler									
Sta	ites in Wh	ich Person	Listed Has	Solicited	or Intends	to Solicit l	Purchasers					<u> </u>	
	(Check	"All States	or check	individual	States)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		***************************************	***************************************	***************************************	☐ Al	l States
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL	IN	IA	KS	KY	LA	ME	MD	MA	MI	MN	MS	MO
	MT RI	NE SC	NV SD	NH TN	NJ TX	NM UT	NY VT	NC VA	ND WA	OH WV	OK WI	OR WY	PA
Fu			first, if indi										
		15.5		<u> </u>									
Bu	siness or	Residence	Address (?	Number an	d Street, C	City, State, 2	Zip Code)						
Na	me of Ass	ociated Bi	oker or De	aler									
Sta	ates in Wh	ich Person	Listed Has	s Solicited	or Intend	s to Solicit	Purchasers						
(Check "All States" or check individual States)									ll States				
	AL	AK	AZ	AR	CA	CO	CT	DE	DC	FL	GA	HI	ID
	IL MT	IN NE	IA NV	KS NH	KY NJ	LA NM	ME NY	MD NC	MA	MI OH	MN	MS	MO
	MT RI	SC	SD	TN	TX	UT	VT	VA	ND WA	WV	OK WI	OR WY	PA PR

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

C'OFFERINGERICE, NUMBERIOFINMESTORS EXPENSES AND USE OF PROCEEDS Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged. Amount Already Aggregate Type of Security Offering Price Sold \$ 0.00 0.00 Debt ..... 0.00 Common Preferred 0.00 0.00 Partnership Interests \$ 0.00 Other (Specify LLC Units 0.00 \_) ...... \$ 10,000,000.00 0.00 Answer also in Appendix, Column 3, if filing under ULOE. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Dollar Amount Number Investors of Purchases \$ 0.00 Accredited Investors..... s 0.00 Non-accredited Investors 0 \$ 0.00 Answer also in Appendix, Column 4, if filing under ULOE. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1. Dollar Amount Type of Type of Offering Security Sold \$ 0.00 N/A Rule 505 ..... N/A \$ 0.00 Regulation A ..... 0.00 \$ Rule 504 \$ 0.00 Total Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 0.00 Transfer Agent's Fees 300.00 Printing and Engraving Costs

4 of 9

Legal Fees

Accounting Fees .....

Engineering Fees

Total .....

23,000.00

0.00

0.00

1,700.00 25,000.00

0.00

	C OFFERING PRICE, NUMB	ERIOT INVESTO	DRS, EXPENSES AND USE O	FPROCEEDS	
	b. Enter the difference between the aggregate offering and total expenses furnished in response to Part C — Oproceeds to the issuer."	Question 4.a. Thi	s difference is the "adjusted gre	oss	9,975,000.00
5.	Indicate below the amount of the adjusted gross proceach of the purposes shown. If the amount for any check the box to the left of the estimate. The total of proceeds to the issuer set forth in response to Part	purpose is not the payments list	known, furnish an estimate a ed must equal the adjusted gro	ind	
				Payments to Officers, Directors, & Affiliates	Payments to Others
	Salaries and fees			🔲 \$_0.00	\$ 0.00
	Purchase of real estate			🔲 💲 0.00	\$ <u></u>
	Purchase, rental or leasing and installation of mach and equipment				\$ <u></u>
	Construction or leasing of plant buildings and facil	lities		🗆 \$ <u>0.00</u>	\$_0.00
	Acquisition of other businesses (including the valu offering that may be used in exchange for the asset issuer pursuant to a merger)	ts or securities o	f another	┌ \$ 0.00	\$ 0.00
	Repayment of indebtedness				\$ 0.00
	Working capital				\$ 75,000.00
	Other (specify): Investment in Costa Rican entity	y			9,900,000.00
				 	\$_0.00
	Column Totals			§ <u>0.00</u>	9,975,000.00
	Total Payments Listed (column totals added)				,975,000.00
		D. FEDERA	LSIGNATURE		
sig	e issuer has duly caused this notice to be signed by the nature constitutes an undertaking by the issuer to furn information furnished by the issuer to any non-accr	nish to the U.S.	Securities and Exchange Com	mission, upon writt	
Iss	uer (Print or Type)	Signature	14/12	Date (	7/1
C.	A One Investors L.L.C.		(11/)	8/1.	グロン
Na	me of Signer (Print or Type)	Title of Signer	(Print or Type)		<del>/</del>
Ru	ssell A. Whitney	President			
			<del> </del>		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

		E. STATE SIGNATURE						
1.	Is any party described in 17 CFR 230.262 pre provisions of such rule?	• •	Yes No					
	See A	Appendix, Column 5, for state response.						
2.	The undersigned issuer hereby undertakes to fu D (17 CFR 239.500) at such times as required	urnish to any state administrator of any state in which this notice is fild by state law.	led a notice on For					
3.	The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.							
4.		suer is familiar with the conditions that must be satisfied to be enti ate in which this notice is filed and understands that the issuer clain ing that these conditions have been satisfied.						
	er has read this notification and knows the conte thorized person.	ents to be true and has duly caused this notice to be signed on its behal	f by the undersign					
Issuer (	Print or Type)	Signature Date Date	7/x(					
CA One	Investors L.L.C.	$ \langle \psi \vee \rangle  $	40)					
Name (I	Print or Type)	Title (Print of Type)	<del>/</del>					

President

### Instruction:

Russell A. Whitney

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

				FAP	PENDIX				
1	Intendation non-a	I to sell ccredited s in State -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									
AK									
AZ									
AR									
CA									
СО				·					
СТ									
DE									
DC									
FL									
GA									
HI									
ID									
IL									
IN									
IA									
KS									
KY									
LA									
ME									
MD									
MA									
MI									
MN									
MS									

				APPI	ND X				
1	Intend to non-a	to sell ccredited s in State -Item 1)	3 Type of security and aggregate offering price offered in state (Part C-Item 1)		amount pu	4  investor and rchased in State C-Item 2)		5 Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E-Item 1)	
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
МО									
MT									
NE									
NV									
NH									
NJ									
NM									
NY									
NC									
ND									
ОН									
ок						-			
OR									
PA									
RI									
SC									
SD									
TN									
TX									
UT									
VT									
VA									
WA									
WV									
WI									

				APP	ENDIX						
1		2	3		4						
	to non-a	I to sell accredited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)		Type of investor and amount purchased in State (Part C-Item 2)				amount purchased in State waiver gran		attach ation of granted)
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No		
WY											
PR											